

School Health Advisory Committee

February 8, 2001

G building, room 107

10:15 a.m. to 3:00 p.m.

Committee Members present:

Ann Sims, M.D.
Ramón Orduño
Michelle Smith
Michael Hinojosa
Charles Meisgeier, Ed.D.

Tommy Fleming, Ph.D.
Jenni Jennings
Ruth Stewart, MS, RNCS
Jane Tustin, R.N.

Staff present:

Michelle McComb
Marion Stoutner
Todd Shaw - Facilitator

Ruth Andersen
Diane Montoya
Ernesto Marquez

Visitors:

Armando Ramos, Youth and Family Center, Dallas Independent School District
Pam Burke, Texas Association of School Nurses

Begin Meeting

1. Introduction of facilitator, Mr. Todd Shaw of the Texas Department of Health.
2. Quorum not attained at beginning of meeting.
3. Two committee members available by telephone, if needed for vote items.
 - a. Mike Young, Legal representative of the Bureau of Children's Health, consulted for appropriate procedure should vote be taken over the phone.
 - b. Mr. Young indicated that the telephone must have speakerphone capabilities and conversation from that point must be recorded.
4. Agenda immediately shifted to discussion items until quorum is reached.

TEA Status Report, Tommy Fleming, Ph.D.

1. Through the previous meeting, Mr. Fleming brought to the committee the letter of intent collaborated through the Texas Education Agency (TEA) and the Texas Department of Health (TDH). The letter of intent asked for technical assistance in the State of Texas, through an infrastructure grant offered by the Center for Disease Control (CDC).
2. The infrastructure grant would enable Texas to receive additional funding for health education program, going beyond the traditional HIV prevention basic grant.
3. Mr. Fleming informed the group that the results of the intent letter will not be known until February 15, 2001, due to program scheduling.

Quorum has been reached through the arrival of two committee members, agenda adjusted to reflect

Review of previous meeting minutes

- Changes to minutes
 - a. Page 3, 2nd bullet, Jane Tustin asked that her comment be reworded to reflect her concern that the committee not be limited to one issue, but rather be broad minded.
 - b. Page 3, #15, typographical error, unnecessary word in sentence.
 - c. Page 4, typographical error, unfounded to unfunded.
 - d. Page 5, typographical error, comprable to comparable.
- Changes noted in minutes, Chair states the approval of the minutes as corrected, committee approves.

Action Item, Strategizing of goals

1. Group discussion regarding the intent of the activity, committee then moves to begin activity.
2. Concern is raised as to whether this activity will result in another draft of a mission statement, the facilitator states that the program needs direction as to where the committee needs/wants to begin focusing and this activity will help assess where the group desires to start.
3. Mr. Fleming suggested to the group obtaining a RN's view of school health services, people who are performing SHS everyday, and would be able to suggest from their experiences, standards of practice, or guidelines.
4. Jane Tustin added to Mr. Fleming's suggestion that the committee should realize it is a coordinated effort, not just school nurses. There are counselors, school staff, as well as school nurses. Ms. Tustin also pointed out that the American Academy of Pediatrics (AAP) is looking into setting national guidelines, with specifics in fourteen areas that impact children's health. It would be good for the committee to review their suggested guidelines.

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5. Charles Meisgeier, inquired if there where any "model school health programs, where schools or districts in Texas can look to those and state whether or not they have some of the components. Further adding if the committee could develop a model that has acceptable standards of school health, or what total health services should be. The committee could look at current state programs, determine the gaps, and act on those.
6. Dr. Andersen indicated that on the School Health Program (SHP) website, there is a model of coordinated school health.
7. Dr. Meisgeier then inquired if the SHP had been able to retrieve any other state's models of comprehensive school health.
8. Group discussion regarding the resistance some districts may have when trying to implement the committees recommendations, such as:
 - o Some districts may feel as though they are functioning well enough without recommendations,
 - o Other districts may not recognize an immediate need for the recommendation.
9. Committee members feel that a high level of endorsement would be necessary for a successful working model.
10. General discussion of the CATCH program:
 - o Health services component left out of CATCH model at this time
 - o CATCH developed because prevention is needed in addition to health services. There was a need to improve physical education, choice-making skills, and CATCH enhances these skills.
11. Mr. Fleming has been working on a project through TEA that will begin next year – a research program that connects quality health education with attendance. This program has been given \$300,000 to conduct a center for this type of research.
12. Committee is pleased with the amount of health related bills being introduced for this legislative session.
13. The committee inquires about the collection of data –whose responsibility it is to retrieve the data in conjunction with the YRBS, CHIPS, school health services & staffing survey, etc.
14. The committee members have asked to be kept up to date on legislative issues & bills that may have an affect on school health services. Ms McComb has volunteered to email/fax legislative alerts to committee members, throughout the duration of the 77th session of the Texas Legislature.

School Health Program (SHP) Update, Michelle McComb, Marion Stoutner

1. SHP has their first issue of the newsletter out that has been distributed to all districts in Texas.
 - a. Looking to have three issues: Spring, "Back to School", and Winter.
2. Head lice guidelines are in review at the moment, with collaboration from the National Pediculosis Association for their graphics and insight. Collaboration has also been strong with other stakeholders.
3. Dr. Ruth Andersen has been working on a revision of the Texas Comprehensive School Health Network brochure
4. There is a new position in the School Health Program staff, created specifically for the School-Based Health Center initiative.
5. We are also looking to revise a publication from TEA, dealing with school nurses, called the *School Nurse Handbook*.
 - a. The University of Texas has submitted a proposal for research in this area last week and the SHP is looking to review the proposal and pare down items for this project.
 - b. This handbook can be used by school nurses as an orientation, or for administrators in their hiring process. It will contain samples of screening forms, current laws that affect the school nurse and administrators, the CDC school health assessment form, to show districts what they already have in place and what they are lacking – a sort of policies and procedure manual.
 - c. Marion Stoutner indicated that in the past, TASN attempted to develop a series of handbooks, however, it was on a volunteer basis only. This resulted in an incomplete handbook. There was a fee involved, as well.
6. There are SHAC vacancies that need to be handled appropriately. A letter needs to be sent to all interested parties to apply for open positions, or positions that will expire May 31, 2001.
 - a. The following terms will end May 31, 2001:
 - i. Ann Sims, M.D.
 - ii. Kathi Seay
 - iii. Charles Meisgeier, Ed.D
7. Ms. McComb distributed to the group bills (proposed legislation) that may affect school nurses, school health services, and school health in general.
 - o House Bill 821,
 - o Senate Bill 56,
 - o House Bill 342,
 - o Senate Bill 283,
 - o House Bill 226,
 - o House Bill 390,
 - o House Bill 640, and
 - o Senate Bill 19.
8. Ruth Stewart inquired about the recent activity due to Bloodborne Pathogens.

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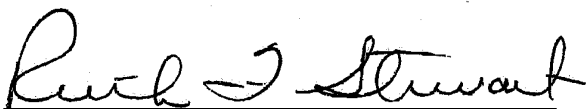
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9. Michelle McComb stated that the Texas Board of Health (BOH) adopted rules in July 2000 requiring all government entities to comply with their standards in conjunction with SHARPS.
 - a. Ms. McComb reported to the committee that since the Texas Association of School Boards sent out an alert to school districts, she has been bombarded with calls from the field, and has, in response & with collaboration with TEA, has provided technical assistance as to how it would affect schools and their practices.
10. Ms. Tustin reported the happenings regarding Bloodborne pathogens from the West Texas area in that most districts have been slow to implement what is required due to their concern about providing the Hepatitis B vaccination to all those "at risk" for exposure. Care and attention does need to apply to those providing training and lectures about Bloodborne Pathogens & what messages could be conveyed to those in attendance.
11. A request was made to the SHP in acquiring a copy of Dr. Pat Cooper's model of coordinated school health for the next meeting.

Committee roundtable

1. The visit with the specialists from the Texas Comprehensive School Health Network is on the agenda for the next meeting. The date of the next meeting will coincide with the last day of the specialists' staff meeting.
2. ALLWELL (June 3-5) is discussed within the committee. ALLWELL brings state of the art health wellness, wellness training, and produces lots of programming to educators in the State of Texas.
3. Possibility of TDH SHAC going as a team to the ALLWELL conference and/or having a retreat in combination with new member orientation.
4. Jenni Jennings listed two items she would like to see:
 - a. Committee members know each other on a personal level.
 - b. The committee more concrete in what is being pursued.
5. Concern is raised by committee that only pieces are available for discussion, not what is necessary to make recommendations.
 - a. All data committee wants to review is not currently available.
 - b. Guidance is needed as to where the information is coming from, or some type of structure is necessary to filter the data, for committee. Suggested that one meeting the committee review numbers, the next meeting deals with models, etc.
6. Michael Hinojosa volunteered to chair a subcommittee for action
 - a. Michelle Smith will assist with this project of applying sub-strategies
 - b. Michelle McComb will be the staff person responsible.
 - c. A timeline will then be devised after discussion with entire committee.

Adjourned



Ruth Stewart, MS, RNCS

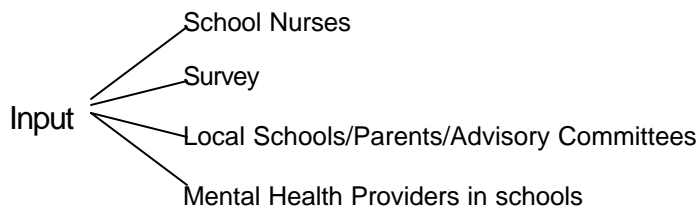
Chair, School Health Advisory Committee

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Taken from Facilitator Activity:



Develop model – minimum guidelines

*CAUTION DEFINITION OF ‘Services’ & Standards

Include all health issues:

- Health services
- Environmental
- Physical
- Nutritional
- Prevention programs
- Mental health

Review what exists:

- CATCH – with expansion to add health services and other components of the coordinated model in the future
- CDC model
- Legislation
- Other state/Nat'l Comprehensive models

What other strategies are impacted?

NEXT STEPS

